

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(571) 273-2885 or <u>Fax</u>

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 7590 09/09/2005				Note: A certificate of Fee(s) Transmittal. The papers. Each addition have its own certificate	mailing can only be used f is certificate cannot be used al paper, such as an assignm e of mailing or transmission.	for domestic mailings of the for any other accompanying the formal drawing, mu
Brinks Hofer Gils P.O. Box 10395 Chicago, IL 60610		Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the Unite States Postal Service with sufficient postage for first class mail in an envelop addressed to the Mail Stop ISSUE FEE address above, or being facsimi transmitted to the USPTO (571) 273-2885, on the date indicated below.				
/2002 EAYALEW2 000000	10810021			Gustavo Sille		(Depositor's name
:1501 1400.00 OP				The		(Signature
: 1504 : 8001	300.00 OP 30.00 OP		•		01/2/08	(Date
APPLICATION NO.	FILING DATE	FI	IRST NAMED INVI	NTOR	ATTORNEY DOCKET NO.	-CONFIRMATION NO.
10/810,021	<u> </u>	03/26/2004 Dou Y			9281-4785	7746
APPLN, TYPE	SMALL ENTITY	I ISSUE FEE	e T	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
				\$300	\$1700	12/09/2005
nonprovisional	NO	31400		3300	31700	12/09/2003
EXAM	INER	ART UNIT	r	CLASS-SUBCLASS	}	
но,	TAN	2821		343-7000MS		
"Fee Address" indicat	lence address (or Change of 22) attached. tion (or "Fee Address" Indic or more recent) attached. Us	ation form	registered attorn 2 registered pate	a single firm (having as by or agent) and the nam at attorneys or agents. It	a member a	ON & LIONE
Number is required. 3. ASSIGNEE NAME AND			IE PATENT (prin	t or type)		document has been filed f
Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in	an assignee is identified b 137 CFR 3.11. Completion	elow, no assignee da of this form is NOT	HE PATENT (prin ata will appear on a substitute for fil	tor type) the patent. If an assigng an assignment.	nee is identified below, the	document has been filed f
Number is required. 3. ASSIGNEE NAME AND	an assignee is identified b 137 CFR 3.11. Completion	elow, no assignee da of this form is NOT	HE PATENT (prin ata will appear on a substitute for fil	t or type)	nee is identified below, the	document has been filed f
Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in	an assignee is identified b n 37 CFR 3.11. Completion EE	elow, no assignee da of this form is NOT a	HE PATENT (prin ata will appear on a substitute for fil	or type) the patent. If an assigng an assignment. TY and STATE OR CO	nee is identified below, the	document has been filed i
Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNI	an assignee is identified b 137 CFR 3.11. Completion EE CCO., LTD.	elow, no assignee da of this form is NOT (B)	HE PATENT (prin ata will appear or a substitute for fil RESIDENCE: (C OKYO, Japa	tor type) the patent. If an assigng an assignment. TY and STATE OR CO	nee is identified below, the d	
Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNI ALPS ELECTRIC Please check the appropriate	an assignee is identified by 37 CFR 3.11. Completion EE C CO., LTD. c assignee category or category	elow, no assignee de of this form is NOT (B) T pries (will not be prin	HE PATENT (prin ata will appear or a substitute for fil RESIDENCE: (C OKYO, Japa	tor type) the patent. If an assigng an assignment. TY and STATE OR CO	nee is identified below, the	
Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNI	an assignee is identified by 37 CFR 3.11. Completion EE C CO., LTD. c assignee category or category	elow, no assignee de of this form is NOT (B) T pries (will not be prin	HE PATENT (prin ata will appear or a substitute for fil RESIDENCE: (CONTROL ON THE PART OF	tor type) the patent. If an assigng an assignment. TY and STATE OR CO	Corporation or other private gr	
Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNI ALPS ELECTRIC Please check the appropriate 4a. The following fee(s) are Issue Fee	an assignee is identified by 37 CFR 3.11. Completion EE C CO., LTD. c assignee category or category	elow, no assignee de of this form is NOT (B) T pries (will not be prin	HE PATENT (prin ata will appear or a substitute for fil RESIDENCE: (Cokyo, Japan ated on the patent) Payment of Fee(s) A check in the	tor type) the patent. If an assigng an assignment. TY and STATE OR CO	Corporation or other private grandlessed.	
Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNI ALPS ELECTRIC Please check the appropriate 4a. The following fee(s) are Issue Fee	an assignee is identified by 37 CFR 3.11. Completion EE CCO., LTD. c assignee category or category conclosed:	elow, no assignee de of this form is NOT (B) Tories (will not be prin 4b.	HE PATENT (prin ata will appear or a substitute for fil RESIDENCE: (Cokyo, Japanted on the patent) Payment of Fee(s) A check in the Payment by cree	tor type) the patent. If an assigng an assignment. TY and STATE OR CO Individual C Individual C amount of the fee(s) is edit card. Form PTO-203	Corporation or other private grandlessed.	roup entity 🔲 Governme
Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNI ALPS ELECTRIC Please check the appropriate 4a. The following fee(s) are 1 Issue Fee Publication Fee (No s Advance Order - # of	an assignee is identified by 37 CFR 3.11. Completion EE CO., LTD. c assignee category or category conclosed: small entity discount permitt f Copies 10 (from status indicated above	elow, no assignee de of this form is NOT (B) Tories (will not be prin 4b.) ed)	HE PATENT (prin at a will appear or a substitute for fil RESIDENCE: (CONKYO, Japanted on the patent) Payment of Fee(son A check in the Payment by creed to be posit Account Note to be posit Account	tor type) the patent. If an assigng an assignment. TY and STATE OR CO Individual Individ	Corporation or other private granclosed. 8 is attached. charge the required fee(s), or enclose an extra	r credit any overpayment, copy of this form).
Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNI ALPS ELECTRIC Please check the appropriate 4a. The following fee(s) are Issue Fee Publication Fee (No s Advance Order - # of 5. Change in Entity Status a. Applicant claims Si	an assignee is identified by 37 CFR 3.11. Completion EE CO., LTD. cassignee category or category conclosed: amall entity discount permitt f Copies 10 (from status indicated above MALL ENTITY status. See	elow, no assignee de of this form is NOT (B) Tries (will not be prin 4b. 1 (ed) (cd) (cd) (cd) (cd) (cd) (cd) (cd) (c	HE PATENT (prin at a will appear or a substitute for fil RESIDENCE: (COOKYO, Japa ated on the patent) Payment of Fee(s) A check in the Payment by cre The Director in Deposit Account No.	tor type) the patent. If an assigng an assignment. TY and STATE OR CO Individual Individ	Corporation or other private granclosed. 8 is attached.	recedit any overpayment, copy of this form).
Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNI ALPS ELECTRIC Please check the appropriate 4a. The following fee(s) are Issue Fee Publication Fee (No s Advance Order - # of 5. Change in Entity Status a. Applicant claims Si	an assignee is identified by 37 CFR 3.11. Completion EE CO., LTD. cassignee category or category conclosed: amall entity discount permitt f Copies 10 (from status indicated above MALL ENTITY status. See	elow, no assignee de of this form is NOT (B) Tries (will not be prin 4b. 1 (ed) (cd) (cd) (cd) (cd) (cd) (cd) (cd) (c	HE PATENT (prin at a will appear or a substitute for fil RESIDENCE: (COOKYO, Japa ated on the patent) Payment of Fee(s) A check in the Payment by cre The Director in Deposit Account No.	tor type) the patent. If an assigng an assignment. TY and STATE OR CO Individual Individ	corporation or other private grant state the required fee(s), or enclosed. State the required fee(s), or enclose an extra cally paid issue fee to the applications or agent; or enclose the application of the state	recedit any overpayment, copy of this form).

an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.